



# Blacksburg Homestay.com

*Providing Housing for International University Students and Visiting Scholars*

## HOMESTAY APPLICATION PROCEDURE AND FEE

- Blacksburg Homestay charges a \$375, non-refundable, application fee to process the application and find a suitable homestay that matches your request as close as possible.
- Fill out and return your application to [maryann@blacksburghomestay.com](mailto:maryann@blacksburghomestay.com) with a copy of your I-20, medical records showing recent TB testing results and passport
- We will advise you of our availability based on the information on your application.
- After receiving confirmation that we have an available homestay for you, you will make your Application Fee Payment through our website's paypal button or bank wire or personal check made out to **Blacksburg Homestay and mailed to: Blacksburg Homestay, 502 Alleghany Street, Blacksburg, Va. 24060 USA** Payments made through Paypal must include a \$15 fee,( goes to paypal), for a total of \$375 which shows on the paypal button. Bank wires of any amount must include a wire fee of \$32 per wire, regardless of the amount, (which is paid to the bank) to be added to the total due.
- The Application Fee is a one-time fee. You may leave and return to Blacksburg Homestay without paying this again.
- We will not place you without receiving your Application Fee.



**HOMESTAY APPLICATION FORM**

Please complete and return this application with your a photo copy of your I-20 and passport to:

Homestay Coordinator:

Mary Ann Lentz Poole  
502 Alleghany Street  
Blacksburg, Va. 24060  
540-552-1149, office, transfers to cell  
[maryann@blacksburghomestay.com](mailto:maryann@blacksburghomestay.com)

**TENANT INFORMATION:**

Name: \_\_\_\_\_

Gender: \_ \_\_\_\_ Age: \_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_ \_ Native Language: \_\_\_\_\_

Country: \_\_\_\_\_ Religion: \_\_\_\_ \_

Emergency Contact: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Telephone (with country code): \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Field of study (other than English): \_\_\_\_ LCI Business \_\_\_\_\_



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## TRAVEL INFORMATION:

Purpose of Travel: \_\_\_\_\_

Arrival Date: \_\_\_\_\_

Anticipated length of Stay: \_\_\_\_\_

Are you a smoker?  yes  no

Can you live with smokers in the home  yes  no

## CURRENT CONTACT INFORMATION:

Current Residence: \_\_\_\_\_

Permanent Residence: \_\_\_\_\_

Source of Funds: \_\_\_\_\_ Family funds

Specific Requirements: \_\_\_\_\_

Expectation: \_\_\_\_\_

## LODGING INFORMATION:

List any Allergies \_\_\_\_\_

Do you want our meals program?

No meals

Continental Breakfast(+ \$60)

Dinner(+ \$270)

Kitchen Privileges (+ \$100)

Accommodations:

Private Room (\$550)

Shared Room (\$450)

Private Bathroom (+ \$75)

Shared Bathroom

Suite Accommodation (+150)

Can you live with a family with pets?

Yes (dogs and cats) (please be specific)

No



**MEDICAL INFO**

Do you have any specific allergies to medications?

- No.  
 Yes, please explain.

\_\_\_\_\_

Do you currently take medications?

- No.  
 Yes, please explain.

\_\_\_\_\_

Have you ever tested positive for TB?

- No.  
 Yes, please explain results.

\_\_\_\_\_

Have you had a chest x-ray in the last 6 months?

- No.  
 Yes, please explain results.

\_\_\_\_\_